Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Sheronda	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Yvette	
	license or passport).	Middle name	Middle name
	Bring your picture	Garth	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	 Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	1	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4555	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		4732 Courtney Lane Apt. G Raleigh, NC 27616				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Wake County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Cha	pter 7					
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	al or	oout how y	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court for nourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card or	k, or money	
						on, sign and attach the Application for Individu	als to Pay	
			•	,	Official Form 103A). ed (You may request this option	n only if you are filing for Chapter 7. By law, a	iudge may.	
		bı ar	ut is not rec oplies to yo	quired to, waive you our family size and	ur fee, and may do so only if yo you are unable to pay the fee i	our income is less than 150% of the official pown installments). If you choose this option, you roial Form 103B) and file it with your petition.	erty line that	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No.	Go to	line 12.				
	residence?	Yes.	Has y	our landlord obtain	ed an eviction judgment agains	st you?		
				No. Go to line 12				
				Yes. Fill out Initia	l Statement About an Eviction	Judgment Against You (Form 101A) and file it	with this	

Case number (if known)

Debtor 1 Sheronda Yvette Garth

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach			per, Street, City, Star	
	it to this petition.				x to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				9	Estate (as defined in 11 U.S.C. § 101(51B))
				•	efined in 11 U.S.C. § 101(53A))
				-	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement c	
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am : Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Cod
ar	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.			, ,, ,
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Case number (if known)

Debtor 1 Sheronda Yvette Garth

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Sheronda Yvette (	3arth		Case number	er (if known)			
Par	t 6: Answer These Quest	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			Yes. Go to line 17.					
		16b.		usiness debts? Business debts are debts	that you incurred to obtain			
		100.	money for a business or inve	estment or through the operation of the bus				
			□ No. Go to line 16c.					
		40	Yes. Go to line 17.					
		16c.	State the type of debts you c	owe that are not consumer debts or busines	ss dedts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. I are paid that funds will be av	Do you estimate that after any exempt proprailable to distribute to unsecured creditors	perty is excluded and administrative expenses?			
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000			
	owe.	☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	How much do you ■ \$0 - \$5		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100.000.001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		<b>—</b> \$500,0	001 - \$1 million	<b>—</b> \$100,000,001 \$4000 Hillion				
20.	How much do you estimate your liabilities	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		_	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have exa	amined this petition, and I ded	clare under penalty of perjury that the inform	mation provided is true and correct.			
				7, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupto and 3571	cy case can result in fines up	, concealing property, or obtaining money of to \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Sherono	onda Yvette Garth la Yvette Garth of Debtor 1	Signature of Debto	r 2			
		Executed	on <b>February 13, 2018</b>	Executed on				
			MM / DD / YYYY	MIV	I / DD / YYYY			

Debtor 1 Sheronda Yvette Garth			Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.						
	/s/ Jason Watson for LOJTO	Date	February 13, 2018			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Jason Watson for LOJTO 32986					
	The Law Offices of John T. Orcutt, PC Firm name					
	6616-203 Six Forks Road					
	Raleigh, NC 27615					
	Number, Street, City, State & ZIP Code					
	Contact phone	Email address				
	32986					

Bar number & State

Fill in this info	rmation to identify you	r case:			
Debtor 1	Sheronda Yvette				
200101	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF EXEMPTIONS)	NORTH CAROLINA (NC		
Case number (if known)				_	Check if this is an amended filing
Be as complete information. If	t of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write yo	
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. What is yo	ur current marital statu	s?			
☐ Marrie ■ Not ma					
2. During the	last 3 years, have you	lived anywhere other than	where you live now?		
■ No □ Yes. L	ist all of the places you li	ived in the last 3 years. Do no	ot include where you live nov	<i>ı</i> .	
Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
				ity property state or territor ico, Texas, Washington and V	
	,	nedule H: Your Codebtors (Ol	ificial Form 106H).		
Part 2 Expl	ain the Sources of You	r Income			
Fill in the to	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
□ No					
Yes. F	fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,000.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	

Official Form 107

Deb	otor 1 Sh	ieronda Y	vette Garth	1	Cas	se number (if known)		
				<b>D</b> 14 4		5.17		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	last calen	dar year: December	31, 2017 )	■ Wages, commissions, bonuses, tips	\$48,219.03	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$48,027.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
	winnings.  List each s	If you are fil	ing a joint ca	s pensions; rental income; interse and you have income that you make source separa	ou received together, list it o	only once under D	ebtor 1.	nd gambling and lottery
				Debtor 1	0	Debtor 2		0
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		dar year be December		401K Distributions	\$1,365.00			
		. O - ot - in D		Mada Bafara Vara Filad far	Dan Laurenten			
Par	LIS	Certain Pa	ayments fol	u Made Before You Filed for	вапкгиртсу			
	Are either  No.	Neither D	ebtor 1 nor l	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	<mark>ımer debts.</mark> Consumer debt	ts are defined in 11	U.S.C. § 1	01(8) as "incurred by an
			90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a tota	al of \$6,425* or mo	re?	
		□ No.	Go to line					
		Yes	paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the on 4/01/19 and every 3 year	nts for domestic support obliques bankruptcy case.	gations, such as ch	nild support	and alimony. Also, do
	Yes.	Debtor 1	or Debtor 2	or both have primarily consu	ımer debts.		•	
		□ <sub>No.</sub>	Go to line	7				
		Yes		<ul><li>each creditor to whom you pai</li></ul>	d a total of \$600 or more and	d the total amount	you paid th	at creditor. Do not
			include pa	yments for domestic support o r this bankruptcy case.				
	Creditor'	's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for
	Paid or	dinary pav	ments, in	part,	\$0.00	\$0.00	☐ Mortga	age
		and loans			<b>43.30</b>	<b>V</b> 5.5 <b>0</b>	☐ Car ☐ Credit ☐ Loan I	
							☐ Othor	

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gene control, or owner of 20% or	eral partners; partner of their voting	erships of which yo g securities; and ar	u are a genera ny managing ag	I partner; corporations gent, including one for
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	No					
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Posson for	this payment
	ilisidei 5 Naille alid Address	Dates of payment	paid	still owe	Include credi	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title					or custody
10.	Case number  Within 1 year before you filed for bankrupt	cy, was any of your prope	rty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	<ul><li>Check all that apply and fill in the details below</li><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>	w.				
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
<ul> <li>11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt?</li> <li>■ No</li> <li>□ Yes. Fill in the details.</li> </ul>					mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	■ No □ Yes					

Case number (if known)

Debtor 1 Sheronda Yvette Garth

Par	t 5: List Certain Gifts and Contribution	s					
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No						
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankr	uptcy,	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?		
	■ No						
	$\square$ Yes. Fill in the details for each gift or c	ontribu	tion.				
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value		
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?	ptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,		
	■ No						
	Yes. Fill in the details.						
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property		
	how the loss occurred		e the amount that insurance has paid. List pending	loss	lost		
			nce claims on line 33 of Schedule A/B: Property.				
Par	t 7: List Certain Payments or Transfers	<b>.</b>					
16.	consulted about seeking bankruptcy or	orepar	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you		
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid		Description and value of any property	Date payment	Amount of		
	Address Email or website address Person Who Made the Permant if Not Y	·a	transferred	or transfer was made	payment		
	Person Who Made the Payment, if Not Y The Law Offices of John T. Orcutt,		Attorney Fees	1/2018	\$1,090.00		
	6616-203 Six Forks Road Raleigh, NC 27615		Attorney rees	1/2010	ψ1,030.00		
	DECAF		Credit Counseling	1/2018	\$30.00		
	112 Goliad Street Benbrook, TX 76126-2009		-				
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	rty to anyone who		
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		

Case number (if known)

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Debtor 1 Sheronda Yvette Garth

Deb	btor 1 Sheronda Yvette Garth			Case number (if known)	
	transferred in the ordinary course of your leads to both outright transfers and transfers minclude gifts and transfers that you have alreated No	nade as security (such	as the granting of a	security interest or mortgage of	on your property). Do not
	Yes. Fill in the details.  Person Who Received Transfer Address	Description a property trans		Describe any property of payments received or d	
	Person's relationship to you			paid in exchange	
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-print No		er any property to a	self-settled trust or similar o	device of which you are a
	Yes. Fill in the details.				
	Name of trust	Description a	nd value of the pro	perty transferred	Date Transfer was made
Par	rt 8: List of Certain Financial Accounts, Ir	nstruments, Safe Dep	oosit Boxes, and St	orage Units	
20.	Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso □ No ■ Yes. Fill in the details.	or other financial ac	counts; certificates	s of deposit; shares in banks	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account number instrument		unt or Date account wa closed, sold, moved, or transferred	s Last balance before closing or transfer
	USAA Federal Savings Bank Attn: Officer/Bankruptcy Department Post Office Box 619094 Dallas, TX 75261-9741	XXXX-	■ Checking □ Savings □ Money Man □ Brokerage □ Other	<b>12/2017</b> rket	\$0.00
	State Farm Bank Post Office Box 2327 Bloomington, IL 61702-2327	xxxx-	■ Checking □ Savings □ Money Mat □ Brokerage □ Other	<b>1/2018</b> rket	\$0.00
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed	d for bankruptcy, a	ny safe deposit box or other	depository for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had Address (Numb State and ZIP Cod	per, Street, City,	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than y	our home within 1	year before you filed for bar	nkruptcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has to it? Address (Number State and ZIP Cod		Describe the contents	Do you still have it?

Debtor 1 Sheronda Yvette Garth

Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. п **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No ☐ Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Case number (if known)

Official Form 107

☐ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

	No. None of the above applies. Go to F	Part 12.							
	☐ Yes. Check all that apply above and fill in the details below for each business.								
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Debtor 1 Sheronda Yvette Garth	Case number (if known)
Part 12: Sign Below	
are true and correct. I understand that making a fa	ncial Affairs and any attachments, and I declare under penalty of perjury that the answers also statement, concealing property, or obtaining money or property by fraud in connection 250,000, or imprisonment for up to 20 years, or both.
/s/ Sheronda Yvette Garth	
Sheronda Yvette Garth Signature of Debtor 1	Signature of Debtor 2
Date February 13, 2018	Date
Did you attach additional pages to Your Statement	t of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone who is not a ■ No	n attorney to help you fill out bankruptcy forms?
_ ```	cy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in	this info	ormation to identify your	case and	this filing:						
Debto	or 1	Sheronda Yvette	Garth							
		First Name		dle Name		Last Name				
Debto	or 2 e, if filing)	First Name	Mide	dle Name		Last Name				
Spous	e, ii iiiiig <i>)</i>	i list Name								
Unite	d States I	Bankruptcy Court for the:	EXEMPT		T OF NORT	H CAROLINA (NC	<b></b>			
Case	number					_				Check if this is an
										amended filing
Offi	cial F	orm 106A/B								
			ort.							
		ıle A/B: Prop								12/15
think it	fits best.	, separately list and describ Be as complete and accura ore space is needed, attach estion.	ate as possi	ble. If two m	narried people	are filing together	, both are equally r	esponsible for s	upplyi	ng correct
Part 1	Describ	pe Each Residence, Buildin	g, Land, or (	Other Real E	State You Ow	n or Have an Intere	est In			
1 Do	(OLL OWN 0	r have any local or equitable	la intaract in	any rasida	naa huildina	land or similar are	norty?			
1. DO	you own o	r have any legal or equitabl	ie iliterest ili	ally resider	nce, bullulily,	ianu, or similar pro	operty:			
<b>I</b>	No. Go to F	Part 2.								
	es. Wher	e is the property?								
Part 2	Describ	oe Your Vehicles								
3. <b>Ca</b> i	No	trucks, tractors, sport u	tility vehic	les, motore	cycles					
0.4		loon					Do not	deduct secured	claims	or exemptions. Put
3.1	Make:	Jeep Compass		_		property? Check or	the am	ount of any secui	red clai	ims on Schedule D: ecured by Property.
	Model: Year:	2016		Debtor 1 o	-					
					and Debtor 2 c	inly		nt value of the property?		rrent value of the rtion you own?
	Other info	ormation:				ors and another				
		Auto Insurance: Polic						\$10,680.00		\$10,680.00
		xx xxx x101 2 r Intends to Surrende		(see instru		inity property		Ψ10,000.00	-	Ψ10,000.00
Exa	mples: Bo	aircraft, motor homes, A pats, trailers, motors, pers llar value of the portion have attached for Part 2 be Your Personal and Hous ir have any legal or equit	you own for Write that	craft, fishing or all of yo t number h	g vessels, sn ur entries fr nere	owmobiles, motor	cycle accessories	or		\$10,680.00
									Do no	on you own? ot deduct secured s or exemptions.

D	ebtor 1 Sheronda Y	vette Garth Case number	: (if known)
6.	Household goods and Examples: Major applia □ No	furnishings nces, furniture, linens, china, kitchenware	
	Yes. Describe		
		Household Goods	\$2,600.00
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanne Il phones, cameras, media players, games	's; music collections; electronic devices
		Television and Computer	\$1,500.00
8.		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; si ions, memorabilia, collectibles	amp, coin, or baseball card collections;
9.	Equipment for sports a  Examples: Sports, photomusical institution  No  Yes. Describe	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ski	s; canoes and kayaks; carpentry tools;
10	Firearms  Examples: Pistols, rifle  No  Yes. Describe	es, shotguns, ammunition, and related equipment	
11	. Clothes  Examples: Everyday c  □ No  ■ Yes. Describe	lothes, furs, leather coats, designer wear, shoes, accessories	
		Clothing and Personal	\$300.00
12	. <b>Jewelry</b> Examples: Everyday je ■ No □ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	es, gems, gold, silver
13	Non-farm animals  Examples: Dogs, cats,  □ No  Yes. Describe	birds, horses	
		One Cat	\$0.00
14	. Any other personal an  ☐ No  ☐ Yes. Give specific in	nd household items you did not already list, including any health aids you did	not list
		Possible Consumer Rights Claim(s). Subject to approval of settlement/award by Bankruptcy Court. Unless otherwise specified, no specific claims are known at present	\$0.00

Debto	Sheronda Yvette Garth	Case number (if known)	
	add the dollar value of all of your entries for Part 3. Write that number here	from Part 3, including any entries for pages you have attached	\$4,400.00
Part 4:	Describe Your Financial Assets		
Do yo	u own or have any legal or equitable inte	rest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples: Money you have in your wallet, in y	your home, in a safe deposit box, and on hand when you file your petit	ion
	Yes	Cash	\$10.00
		Gusti	Ψ10.00
E:	institutions. If you have multiple ac	al accounts; certificates of deposit; shares in credit unions, brokerage counts with the same institution, list each.  Institution name:	houses, and other similar
	17.1. Prepaid D	ebit Card Netspend	\$500.00
E: ■   □ `	No YesInstitution or i	with brokerage firms, money market accounts	st in an LLC, partnership, and
	int venture		,, ,,
ο,	Yes. Give specific information about them Name of entity:	% of ownership:	
N N	egotiable instruments include personal checl on-negotiable instruments are those you car No	er negotiable and non-negotiable instruments ks, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
⊔`	Yes. Give specific information about them Issuer name:		
	,	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	Yes. List each account separately.  Type of account:	Institution name:	
	401(k)	401 (k) (Value: \$4,921.00)	\$0.00
Y	xamples: Agreements with landlords, prepaid	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications compa	nies, or others

Institution name or individual:

■ Yes. .....

Deb	otor 1	Sheronda Yvette Garth			Case number (if known)			
		Security De Landlord	posit with	Security Deposit with Landl	ord	\$100.00		
_	Annuiti ■ No	es (A contract for a periodic payr	nent of money t	o you, either for life or for a number of	· years)			
_	■ No □ Yes	lssuer name and d	escription.					
2		s in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529		lified ABLE program, or under a qua	alified state tuition progi	ram.		
	⊒ Yes	Institution name ar	d description. S	Separately file the records of any interest	ests.11 U.S.C. § 521(c):			
_	Trusts, ■ No	equitable or future interests in	property (other	er than anything listed in line 1), and	d rights or powers exerc	isable for your benefit		
	☐ Yes.	Give specific information about the	nem					
_		s, copyrights, trademarks, trade les: Internet domain names, web		other intellectual property from royalties and licensing agreemen	nts			
	☐ Yes.	Give specific information about the	nem					
_	<b>License</b> <i>Examp</i> ■ No	es, franchises, and other gener les: Building permits, exclusive lie	al intangibles censes, coopera	ative association holdings, liquor licen	ses, professional licenses			
	☐ Yes.	Give specific information about the	nem					
Mo	ney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.		
	Tax refo ∃ No	unds owed to you						
ı	Yes. 0	Give specific information about th	em, including w	hether you already filed the returns ar	nd the tax years			
			Anticipated Refund	l 2017 Federal and State Is	IRS and NC	\$2,000.00		
ı	Examp ■ No	support les: Past due or lump sum alimor Give specific information	ıy, spousal sup	port, child support, maintenance, divor	rce settlement, property se	ettlement		
		mounts someone owes you les: Unpaid wages, disability insu benefits; unpaid loans you m		s, disability benefits, sick pay, vacation e else	n pay, workers' compens	ation, Social Security		
		Give specific information						
_		ts in insurance policies les: Health, disability, or life insur	ance; health sa	ivings account (HSA); credit, homeowr	ner's, or renter's insurance	Э		
_	_	Name the insurance company of Company r		l list its value. Beneficia	ry:	Surrender or refund value:		
_	If you a	erest in property that is due youre the beneficiary of a living trust ne has died.	u from someon , expect procee	ne who has died eds from a life insurance policy, or are	currently entitled to receiv	re property because		

Debtor 1	Sheronda Yvette Garth	Case number (if known)	
☐ Yes.	. Give specific information		
	s against third parties, whether or not you have filed a laws		
■ No	, , , , , , , , , , , , , , , , , , , ,		
☐ Yes.	Describe each claim		
34. Other	contingent and unliquidated claims of every nature, includ	ing counterclaims of the debtor and rights to	set off claims
■ No			
☐ Yes.	Describe each claim		
	nancial assets you did not already list		
■ No			
⊔ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 4, including Part 4. Write that number here		\$2,610.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interes	st In. List any real estate in Part 1.	
37. <b>Do vou</b>	own or have any legal or equitable interest in any business-related	property?	
-	o to Part 6.	1.4.3	
☐ Yes. 0	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You O you own or have an interest in farmland, list it in Part 1.	wn or Have an Interest In.	
	, , , , , , , , , , , , , , , , , , , ,		
	u own or have any legal or equitable interest in any farm- o	r commercial fishing-related property?	
■ No.	. Go to Part 7.		
☐ Yes	s. Go to line 47.		
	_		
Part 7:	Describe All Property You Own or Have an Interest in That You I	Did Not List Above	
	u have other property of any kind you did not already list?  pples: Season tickets, country club membership		
Yes.	. Give specific information		
	.IMPORTANT NOTICES:		
	(1) Valuation Method (Sch. A & B	): FMV unless otherwise noted.	
	(2) Creditor claims disclosed on S		
	drawn largely from unverified info	ormation provided by the creditor,	
		e, etc. Nor is this listing of a creditor	
		by the Debtor(s) that such parties are	
	actual owners of such claims.		\$0.00
-			
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write that	number here	\$0.00
	•		

Deb	stor 1 Sheronda Yvette Garth			Case number (if known)	
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$10,680.00		
57.	Part 3: Total personal and household items, line 15		\$4,400.00		
58.	Part 4: Total financial assets, line 36		\$2,610.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	_	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$17,690.00	Copy personal property total	\$17,690.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$17,690.00

Rev. 3/2016

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)

IN THE MATTER OF: **Sheronda Yvette Garth** Debtor(s). CASE NUMBER:

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

- I, Sheronda Yvette Garth claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).
- 1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
-NONE-						
Debtor's Age: Name of former co-owne	er:					

### VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of <u>Lien</u>	Net <u>Value</u>	
-NONE-		<u> </u>				

#### VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 1.

Description of Property	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Clothing and Personal	300.00				300.00	300.00
Household Goods	2,600.00				2,600.00	2,600.00
One Cat	0.00				0.00	0.00
Television and Computer	1,500.00				1,500.00	1,500.00

#### VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 4,400.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-					

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)		Cash Value
-NONE-		

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
Cash	10.00				10.00	10.00
IRS and NC:	2,000.00				2,000.00	2,000.00
Anticipated 2017						
Federal and State						
Refunds						
Prepaid Debit Card:	500.00				500.00	500.00
Netspend						
Security Deposit	100.00				100.00	100.00
with Landlord:						
Security Deposit						
with Landlord						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 2,610.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

401(k): 401 (k) (Value: \$4,921.00)

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

 $\underline{\textbf{College Savings Plan} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Value} \\ \textbf{Initials of Child Beneficiary} \\ \textbf{Savings Plan} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Value} \\ \textbf{Initials of Child Beneficiary} \\ \textbf{Savings Plan} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Number} \\ \textbf{Nu$ 

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THA
HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are
reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
Type of eapperty unedirected and
NONE
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	of Lien	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14 NORTH CAROLINA PENSION FUND EXEMPTIONS

14. NORTH CAROLINA FENSION FOND EXEMPTIONS	
-NONE-	
15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
-NONE-	
16. FEDERAL PENSION FUND EXEMPTIONS	
-NONE-	
17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW	

18. RECENT PURCHASES

-NONE-

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	 Amount of Lien	Net <u>Value</u>
-NONE-			

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt			

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim		Description of Property	Value of Property	Net <u>Value</u>
Gatewayone Lending	Purchase Money Security Interest	26,434.00	2016 Jeep Compass 22,000 miles USAA Auto Insurance: Policy # xxxxx xx xxx x101 2 *Debtor Intends to Surrender*	10,680.00	0.00

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

# UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, <u>Sheronda Yvette Garth</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: February 13, 2018	/s/ Sheronda Yvette Garth
	Sheronda Yvette Garth
	Debtor

Fill in this informa	ntion to identify yo	ur case:				
Debtor 1	Sheronda Yvet					
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the	EASTERN DISTRICT OF NOR EXEMPTIONS)	RTH CAROLINA	A (NC		
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Form	106D					
Official Form						
Schedule L	): Creditors	s Who Have Claims	Secured	by Propert	у	12/15
		If two married people are filing toget out, number the entries, and attach it				
1. Do any creditors h	ave claims secured b	by your property?				
		this form to the court with your othe	r schedules Yo	u have nothing else t	o report on this form	
_	Ill of the information	,	. conocacios. 10	a navo noumig oloo t	o roport orrano romi.	
		below.				
	Secured Claims			Column A	Column B	Column C
for each claim. If mor	e than one creditor ha	more than one secured claim, list the cr is a particular claim, list the other credito tical order according to the creditor's nar	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Gatewayon	e Lending	Describe the property that secures	the claim:	\$26,434.00	\$10,680.00	\$15,754.00
Creditor's Name		2016 Jeep Compass 22,000	miles	<u> </u>		-
		USAA Auto Insurance: Poli	cy#			
		xxxxx xx xxx x101 2	*			
	onado Street,	*Debtor Intends to Surrend As of the date you file, the claim is:				
# 100	· A 02007	apply.				
Anaheim, C		Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the deb	t? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	ıred		
Debtor 2 only		car loan)	3.3.			
Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clai community debt	m relates to a	Other (including a right to offset)	Purchase M	oney Security Int	erest	
Date debt was incur	red 2016	Last 4 digits of account num	nber			
Add the dollar value	ue of your entries in (	Column A on this page. Write that nun	nber here:	\$26,43	34.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	rmation to identify your ca	ise:		
Debtor 1	Sheronda Yvette G	arth		
	First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Name	LastMana	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B		EASTERN DISTRICT ( EXEMPTIONS)	DF NORTH CAROLINA (NC	
Case number				
(if known)				Check if this is an
				amended filing
Official For	m 106E/E			
	E/F: Creditors Wh	a Haya Hasaa	urad Claims	12/15
			PRIORITY claims and Part 2 for creditors with NONPRIORITY cla	
Schedule D: Cred left. Attach the Co name and case no	litors Who Have Claims Secur ontinuation Page to this page.	ed by Property. If more s If you have no information	106G). Do not include any creditors with partially secured claim pace is needed, copy the Part you need, fill it out, number the e on to report in a Part, do not file that Part. On the top of any add	ntries in the boxes on the
1. Do any credi	itors have priority unsecured	claims against you?		
■ No. Go to	Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORITY	Unsecured Claims		
3. Do any credi	itors have nonpriority unsecu	red claims against you?		
☐ No. You h	ave nothing to report in this par	t. Submit this form to the co	ourt with your other schedules.	
Yes.	9			
unsecured cla	aim, list the creditor separately f	or each claim. For each cla	der of the creditor who holds each claim. If a creditor has more the sim listed, identify what type of claim it is. Do not list claims already in 3.If you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
				Total claim
4.1 <b>.IMPO</b>	RTANT NOTICE:	Last 4 digit	s of account number	\$0.00
See no	ity Creditor's Name otice re: creditor claims on Schedule A	s set When was	the debt incurred?	
	Street City State Zlp Code	As of the da	ate you file, the claim is: Check all that apply	
Who inc	curred the debt? Check one.			
■ Debte	or 1 only	☐ Continge	ent	
☐ Debte	or 2 only	☐ Unliquida	ated	
	or 1 and Debtor 2 only	☐ Disputed		
	ast one of the debtors and anoth	ner Type of NO	NPRIORITY unsecured claim:	
☐ Chec	ck if this claim is for a commu	Inity	loans	
debt	aim subject to offset?	•	ons arising out of a separation agreement or divorce that you did not ority claims	
■ No		☐ Debts to	pension or profit-sharing plans, and other similar debts	
☐ Yes		Other. S	pecify	_

Debto	Sheronda Yvette Garth	Case number (if know)	
4.2	Afni, Inc.	Last 4 digits of account number	\$344.26
	Nonpriority Creditor's Name 404 Brock Drive Post Office Box 3097	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	П	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify  Collection Account	
	<b>=</b> 135	Other. Specify	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$598.00
	Post Office Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred? 2015	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.4	Conns Credit Corp	Last 4 digits of account number	\$2,520.00
	Nonpriority Creditor's Name Attn: Officer Post Office Box 2358	When was the debt incurred? 2017	
	Beaumont, TX 77704-2358  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	□ Debtor 2 only □ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	

Debtor 1 Sheronda Yvette Garth		Case number (if know)	
4.5	Federal Loan Servicing  Nonpriority Creditor's Name	Last 4 digits of account number	\$20,550.00
	P.O. Box 60610 Harrisburg, PA 17106	When was the debt incurred? 2011-2012	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loans	
4.6	NCC Business Services, Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$1,414.00
	9428 Baymeadows Rd. Ste 200 Jacksonville, FL 32256-7912	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Rent Deficiency (Lakes DFMC)	
4.7	OneMain	Last 4 digits of account number	\$3,006.00
	Nonpriority Creditor's Name 100 International Drive 17th Floor	When was the debt incurred? 2017	
	Baltimore, MD 21202  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Installment Loan	

Debto	Sheronda Yvette Garth	Case number (if know)					
4.8	Raleigh Radiology Cedarhurst	Last 4 digits of account number	\$1,606.00				
	Nonpriority Creditor's Name Post Office Box 630945 Cincinnati, OH 45263	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts  ☐ Other Specify Medical Bills					
	Li res	Other. Specify Medical Bills					
4.9	REX Healthcare  Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00				
	Attn: Patient Financial Services	When was the debt incurred?					
	4420 Lake Boone Trail						
	Raleigh, NC 27607  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	, and the jet may me thank to chook an anatoppy					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Medical Bills					
4.1							
0	State Farm Bank	Last 4 digits of account number	Unknown				
	Nonpriority Creditor's Name Post Office Box 2327	When was the debt incurred?					
	Bloomington, IL 61702-2327						
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Bank Fees					
		· · ·					

Debtor	Sheronda Yvette Garth	Case number (if know)					
4.1	Triangle Family Dentistry	Last 4 digits of account number	\$497.00				
	Nonpriority Creditor's Name 1625 North Main Street Ste 201	When was the debt incurred?					
	Fuquay Varina, NC 27526  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical Bills					
4.1	LICAA Fadaval Cavinasa Bank		Halmann				
2	USAA Federal Savings Bank  Nonpriority Creditor's Name	Last 4 digits of account number	Unknown				
	Attn: Officer/Bankruptcy	When was the debt incurred?					
	Department						
	Post Office Box 619094						
	Dallas, TX 75261-9741  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Bank Fees					
4.1	USAA Savings Bank	Last 4 digits of account number	\$1,118.00				
3	Nonpriority Creditor's Name		<del>+ 1,11111</del>				
	Post Office Box 33009 San Antonio, TX 78265-3009	When was the debt incurred? 2015					
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Card Purchases					

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Sheronda Yvette Garth		Case number (if know)					
have more than one creditor for any of the d notified for any debts in Parts 1 or 2, do not		t the additional creditors here. If you do not have additional persons to be					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?					
Raleigh Radiology Associates	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
Post Office Box 12408		Part 2: Creditors with Nonpriority Unsecured Claims					
Roanoke, VA 24025-2408		— 1 att 2. Oreations with Nonphority offsecured oralins					
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?					
Rex Hospital	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
Post Office Box 71058		Part 2: Creditors with Nonpriority Unsecured Claims					
Charlotte NC 28272		— Fait 2. Ordators with Nonphority Orisecured Glaims					

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				 
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	Total Claim
Total	OI.	Student loans	OI.	\$ 20,550.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 13,103.26
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 33,653.26

Last 4 digits of account number

o identify your	case:		
ronda Yvette	Garth		
ame	Middle Name	Last Name	
ame	Middle Name	Last Name	
Court for the:	EASTERN DISTRICT C EXEMPTIONS)	F NORTH CAROLINA (NC	
			☐ Check if this is an
	ronda Yvette ame	ame Middle Name  EASTERN DISTRICT C	arme Middle Name Last Name  Ame Middle Name Last Name  EASTERN DISTRICT OF NORTH CAROLINA (NC

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	AT&T Wireless Correspondence Post Office Box 10330 Fort Wayne, IN 46851-0330	Type: Service Contract Description: Cell Phone Terms: \$107.00 per Month (24 Months) Beginning Date: 12/2016 Debtor's Interest: Lessee Debtor's Intention: Assume
2.2	Fairfield Inn 4732 Courtney Lane Raleigh, NC 27616	Type: Residential Lease Description: Apartment Terms: \$960.00 per Mont (12 Months) Beginning Date: 4/2017 Debtor's Interest: Lessee Debtor's Intention: Assume

Fill in this in	nformation to identify your	case:			
Debtor 1	Sheronda Yvette				
Dalatano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	PF NORTH CAROLINA	(NC	
Case numbe	ar.				
(if known)					☐ Check if this is an amended filing
	Form 106H Ile H: Your Cod	ebtors			12/15
people are fi fill it out, and your name a	ling together, both are equal number the entries in the nd case number (if known)	ally responsible for supposes on the left. Attack Answer every question	olying correct information the Additional Page (	tion. If more space is n to this page. On the top	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
1. Do yo	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				y states and territories include
_	to to line 3. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2	again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	Α.
	ame			☐ Schedule E/F, I	
				☐ Schedule G, lin	
Nu Cit	imber Street	State	ZIP Code	_	
22				□ Cakadula D. P.	
3.2 Na	ame			□ Schedule D, line □ Schedule E/F, I	
				☐ Schedule G, lin	
Ni	ımber Street			_	
Cit		State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to	identify your cas	se:							
Del	btor 1	Sheronda Yve	ette Garth			_				
	btor 2 buse, if filing)					_				
Uni	ited States Bankrupt	cy Court for the:	EASTERN DISTRICT EXEMPTIONS)	OF NORTH CAROL	INA (NC	_				
	se number nown)							ent showing	postpetition (	chapter
0	fficial Form	106I					MM / DD/ Y		3	
S	chedule I: \	Your Inco	me			,	WIIWI 7 DD7 1			12/15
sup spo atta	plying correct inforuse. If you are sepa ch a separate shee	rmation. If you a arated and your	ble. If two married peo re married and not filir spouse is not filing wi n the top of any addition	ng jointly, and your th you, do not inclu	spouse is ide inform	living with	h you, inclu ut your spo	ude informa	ation about y re space is n	your eeded,
1.	Fill in your emplo	yment		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more that attach a separate information about	page with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			☐ Emplo	•		
	employers.		Occupation	Team Lead						
	Include part-time, self-employed wor		Employer's name	Bob Barker Cor	mpany					
	Occupation may in or homemaker, if it		Employer's address	134 North Main Fuquay Varina,		26				
			How long employed th	nere? <u>5 Years</u>	s 6 Mont	hs				
Pai	Give Deta	ails About Mont	hly Income							
	imate monthly inco use unless you are s		te you file this form. If y	ou have nothing to r	eport for a	ny line, wri	te \$0 in the	space. Incl	ude your non	-filing
	ou or your non-filing s e space, attach a se		e than one employer, conis form.	mbine the informatio	on for all er	nployers fo	r that perso	n on the line	es below. If y	ou need
						For De	ebtor 1	For Debt non-filin	tor 2 or g spouse	
2.			, and commissions (be alculate what the monthly		2.	\$	4,455.15	\$	N/A	
3.	Estimate and list	monthly overting	ne pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add line	2 + line 3.		4.	\$\$	155.15	\$	N/A	

					For	Debtor 1			r Debtor n-filing s		
	Сору	/ line 4 here	4.		\$	4,455	.15	\$	ii-iiiiig s	N/A	
					-	.,		-			<u>-</u>
5.	List a	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$	662	.94	\$		N/A	4_
	5b.	Mandatory contributions for retirement plans	5b	).	\$	0	.00	\$		N/A	4
	5c.	Voluntary contributions for retirement plans	5c	<b>;</b> .	\$	222	.75	\$		N/A	4
	5d.	Required repayments of retirement fund loans	5d	l.	\$_	0	.00	\$		N/A	4
	5e.	Insurance	5e	<del>)</del> .	\$	348	.70	\$		N/A	Δ.
	5f.	Domestic support obligations	5f.		\$	0	.00	\$		N/A	4
	5g.	Union dues	5g	J.	\$_	0	.00	\$		N/A	4
	5h.	Other deductions. Specify: Health Savings Account	5h	1.+	\$_	162	.50	+ \$ _		N/A	4
		Disability Insurance	_		\$	18	.07	\$		N/A	4
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,414	.96	\$		N/A	4
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,040	.19	\$_		N/A	4
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	9.0		¢			¢		NZ	
	O.L.	monthly net income.	8a		\$_		.00	\$_		N//	
	8b.	Interest and dividends	8b	).	\$_	U	.00	\$_		N/A	<u>4</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0	.00	\$_		N//	
	8d.	Unemployment compensation	8d	l.	\$	0	.00	\$		N/A	4
	8e.	Social Security	8e	<del>)</del> .	\$	0	.00	\$		N/A	4
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_		.00	\$_		N//	
	8g.	Pension or retirement income	- 8g	J.	\$	0	.00	\$_		N/A	<u>4</u>
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0	.00	+ \$_		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	3	\$	0	.00	\$_		N	/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	;	3,040.19	+ \$		N/A	= \$	3,040.19
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depe		•			•	Schedule	e J. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$	
13.		ou expect an increase or decrease within the year after you file this form?	?							montl	hly income
		Yes. Explain:									

Fill	in this information to identify yo	ur case:				
Deb	tor 1 Sheronda Yv	ette Garth		Check	if this is:	
	tor 2			_ A		ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH (NC EXEMPTIONS)	CAROLINA	N	MM / DD / YYYY	
	e number nown)					
	fficial Form 106J					
Be info		possible. If two married people areded, attach another sheet to this				
Par	Describe Your Housel Is this a joint case?	hold				
	■ No. Go to line 2.  ☐ Yes. <b>Does Debtor 2 live in</b>	n a separate household?				
	☐ No☐ Yes. Debtor 2 must	t file Official Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debto	r 2.	
2.	Do you have dependents?	□No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.		Daughter		16 Years	□ No ■ Yes □ No
						☐ Yes ☐ No ☐ Yes
						□ No □ Yes
3.	Do your expenses include expenses of people other th yourself and your depender					
exp	imate your expenses as of yo	ng Monthly Expenses our bankruptcy filing date unless y ankruptcy is filed. If this is a supp				
the		on-cash government assistance in I have included it on Schedule I: Y			Your exp	enses
4.	The rental or home ownersh payments and any rent for the	nip expenses for your residence. In ground or lot.	nclude first mortgage	4. \$		960.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's			4b. \$		0.00
		pair, and upkeep expenses on or condominium dues		4c. \$		0.00
5.		on or condominium dues  nts for your residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

Debtor	1 Sheronda Yvette Garth	Case num	ber (if known)	
S. U	tilities:			
. 6a		6a.	\$	100.00
61	•	6b.	\$	60.00
60	, , , , ,	6c.	· : ————	0.00
60		6d.	\$	107.00
	Internet		\$	65.00
. F	pod and housekeeping supplies		\$	583.00
	hildcare and children's education costs	8.	\$	0.00
	lothing, laundry, and dry cleaning	9.	\$	148.00
	ersonal care products and services	10.	\$	61.00
	edical and dental expenses	11.	·	0.00
	ransportation. Include gas, maintenance, bus or train fare.			0.00
	o not include car payments.	12.	\$	250.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	haritable contributions and religious donations	14.	\$	0.00
. In	surance.			
D	o not include insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurance	15a.	·	0.00
	5b. Health insurance	15b.	·	0.00
15	5c. Vehicle insurance	15c.	\$	101.00
15	5d. Other insurance. Specify:	15d.	\$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	pecify:	16.	\$	0.00
	stallment or lease payments:		_	
	7a. Car payments for Vehicle 1	17a.		0.00
	7b. Car payments for Vehicle 2	17b.	·	0.00
	7c. Other. Specify:	17c.	\$	0.00
	7d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report a		\$	0.00
	educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I) ther payments you make to support others who do not live with you.	. 10.	\$	0.00
	ther payments you make to support others who do not live with you.	19.	Ψ	0.00
	ther real property expenses not included in lines 4 or 5 of this form or on <i>ScI</i>		our Income.	
	Da. Mortgages on other property	20a.		0.00
	Db. Real estate taxes	20b.		0.00
	Oc. Property, homeowner's, or renter's insurance	20c.		0.00
	Od. Maintenance, repair, and upkeep expenses	20d.		0.00
	De. Homeowner's association or condominium dues	20e.	·	0.00
	ther: Specify: Prospective New Car	21.	·	400.00
	· · · · · · · · · · · · · · · · · · ·		+\$	125.00
	mergencies /Miscellaneous		-Ψ	123.00
. C	alculate your monthly expenses			
22	2a. Add lines 4 through 21.		\$	3,060.00
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,060.00
				<u>,                                      </u>
	alculate your monthly net income.	00-	¢	0.040.40
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,040.19
23	Bb. Copy your monthly expenses from line 22c above.	23b.	-\$	3,060.00
21	20 Subtract your monthly expanded from your monthly income			
2.	Bc. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23c.	\$	-19.81
	The result is your monthly her mound.			
Fo m	o you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?			or decrease because of a
	No.			
Г	Yes. Explain here:			-

Fill	in this informa	ation to identify your	case:			
Deb	otor 1	Sheronda Yvette				
Dok	otor 2	First Name	Middle Name	Last Name		
1	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	cruptcy Court for the:	EASTERN DISTRICT EXEMPTIONS)	OF NORTH CAROLINA (NC		
Cas	se number					
1	own)				_	if this is an ded filing
Of	ficial Fori	m 106Sum				
			and Liabilities a	ınd Certain Statistical Informatio	n 1	2/15
info	rmation. Fill ou original forms	ıt all of your schedul	es first; then complete	le are filing together, both are equally responsible the information on this form. If you are filing ame ck the box at the top of this page.		
					Your as Value o	ssets f what you own
1.	Schedule A/E 1a. Copy line	<b>3: Property</b> (Official Fo	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/E	3	\$	17,690.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		. \$	17,690.00
Par	t 2: Summar	rize Your Liabilities				
						abilities you owe
2.			laims Secured by Propei mn A, Amount of claim, a	ty (Official Form 106D) it the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	26,434.00
3.			Unsecured Claims (Office 1 (priority unsecured cla	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	33,653.26
				Your total liabiliti	es \$	60,087.26
Par	t 3: Summar	rize Your Income and	Expenses			
4.		our Income (Official Fo		ile I	. \$	3,040.19
5.		our Expenses (Official onthly expenses from li			\$	3,060.00
Par	t 4: Answer	These Questions for	Administrative and Sta	atistical Records		
6.	, ,		er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form to the court with	your other sch	edules.
	Yes	-				
7.		debt do you have?				
				r debts are those "incurred by an individual primarily 99 for statistical purposes. 28 U.S.C. § 159.	for a personal,	family, or

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Official Form 106Sum

the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,455.15

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	20,550.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	20,550.00

Fill in th	nis info	ormation to identify your	case:					
Debtor '	1	Sheronda Yvette	Garth					
		First Name	Middle Name	La	t Name			
Debtor 2		E: AN						
(Spouse if,	tiling)	First Name	Middle Name	La	t Name			
United S	States E	Bankruptcy Court for the:	EASTERN DISTRICT ( EXEMPTIONS)	OF NORTH (	CAROLINA (NC			
Case nu	ımber							
(if known)							_ c	heck if this is an
							aı	mended filing
		rm 106Dec Ition About a	ın Individua	l Debt	or's Sche	edules		12/15
	r both.	ey or property by fraud ii 18 U.S.C. §§ 152, 1341, 1		kruptcy cas	e can result in fir	ies up to \$250,0	ou, or impriso	onment for up to 20
Dio	d you p	pay or agree to pay some	one who is NOT an atto	rney to help	you fill out bank	ruptcy forms?		
	No							
	Yes.	Name of person						on Preparer's Notice, ure (Official Form 119)
that	t they a	nalty of perjury, I declare are true and correct. neronda Yvette Garth	that I have read the sun	nmary and s	chedules filed wi	ith this declarat	ion and	
	-	onda Yvette Garth ture of Debtor 1			Signature of Deb	tor 2		
	Date	February 13, 2018			Date			

Fill in this inform	ation to identify your	case:		
Debtor 1	Sheronda Yvette First Name	Middle Name	Last Name	
Debtor 2	ristrano	Widdle Name	Edot Nume	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	EASTERN DISTR EXEMPTIONS)	ICT OF NORTH CAROLINA (NC	
		,		
Case number (if known)				☐ Check if this is an amended filing
Official For <b>Statemen</b>		n for Indiv	riduals Filing Under Chapto	er 7 12/15
	idual filing under cha claims secured by yo	=	out this form if:	
You must file this	er is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
	pple are filing together I date the form.	in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
	nd accurate as possib ur name and case nun		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List You	ur Creditors Who Have	e Secured Claims		
For any creditor information below.		art 1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the cred	ditor and the property the	nat is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's Ga	tewayone Lending		■ Surrender the property.  □ Retain the property and redeem it.	□ No
Description of	2016 Jeep Compas	es 22 000	☐ Retain the property and enter into a	■ Yes
property	miles	55 22,000	Reaffirmation Agreement.  □ Retain the property and [explain]:	
securing debt:	USAA Auto Insura	nce: Policy #	Tretain the property and [explain].	
J	xxxxx xx xxx x101			
	*Debtor Intends to	Surrender*		<u></u>
Dort 2: List Vo.	u Unavaired Devene	I Dramarty I again		
For any unexpired in the information	below. Do not list rea	ase that you listed I estate leases. Un	in Schedule G: Executory Contracts and Unexpir expired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your up	evnired personal pre-	norty logge		Will the lease be accumed?
Describe your un	expired personal prop	Jerty leases		Will the lease be assumed?
Lessor's name:	AT&T			□ No
				■ Yes
Description of leas Property:	Type: Service Description: C			

Official Form 108

Debtor 1	Sheronda Yvette Garth	Case number (if known)
Debioi	Sheronda i velle Garth	Case Humber (II known)

Terms: \$107.00 per Month (24 Months)

Beginning Date: 12/2016 Debtor's Interest: Lessee Debtor's Intention: Assume

Lessor's name: Fairfield Inn

Yes

Description of leased Property: Type: Residential Lease Description: Apartment

Terms: \$960.00 per Mont (12 Months)

Beginning Date: 4/2017 Debtor's Interest: Lessee Debtor's Intention: Assume

Debto	or 1 _ <b>S</b>	Sheronda Yvette Garth	Case number (if known)
Part 3	Si Si	gn Below	
		ty of perjury, I declare that I have indica t is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
x /	s/ She	eronda Yvette Garth	X
•	Shero	nda Yvette Garth	Signature of Debtor 2
5	Signatu	re of Debtor 1	
[	Date	February 13, 2018	Date

## **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

In re	Sheronda Yvette Garth	,	Case N	lo.	
		Debtor(s)	Chapte	er <b>7</b>	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing one rendered on behalf of the debtor(s) in contemplation of or	of the petition in bankruptcy	y, or agreed to be p	aid to me, for services reno	dered or to
	For legal services, I have agreed to accept		\$	1,090.00	
	Prior to the filing of this statement I have received		\$	1,090.00	
	Balance Due			0.00	
2. \$	335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. 7	The source of compensation to be paid to me is:				
	$\blacksquare$ Debtor $\square$ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compens	sation with any other person	n unless they are m	embers and associates of r	ny law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				v firm. A
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspec	cts of the bankrupt	cy case, including:	
ł	<ul> <li>a. Analysis of the debtor's financial situation, and rendering.</li> <li>b. Preparation and filing of any petition, schedules, statements.</li> <li>c. Representation of the debtor at the meeting of creditors and in the provisions as needed.</li> <li>d. [Other provisions as needed]</li> <li>Exemption planning, Means Test planning, or required by Bankruptcy Court local rule.</li> </ul>	ent of affairs and plan whic and confirmation hearing, a , and other items if spe	th may be required and any adjourned cifically include	; hearings thereof; d in attorney/client fee	contract
7. I	meeting.  By agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any disch dismissal motions, and any other items ex	argeability actions, rel	ief from stay mo	otions, adversary proce r excluded by Bankrup	eedings, otcy Court
	local rule.  Fee also collected, where applicable, inclu each, Judgment Search: \$10 each, Credit C Class Certification: Usually \$15 per client, Managment Class: \$10 per session, or para session.	Counseling Certification Use of computers for (	n: Usually \$15 p Credit Counselir	er client, Financial Mar g briefing or Financial	nagement
		CERTIFICATION			
	certify that the foregoing is a complete statement of any agankruptcy proceeding.	greement or arrangement fo	or payment to me f	or representation of the deb	otor(s) in
F	ebruary 13, 2018	/s/ Jason Watso			
$\overline{D}$	ate	Jason Watson for			
		Signature of Attorr The Law Offices		utt, PC	
		6616-203 Six Fo	rks Road	•	
		Raleigh, NC 276	15		
		Name of law firm			

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcv\_fo

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill ir	n this infor	mation to identify your case:		Ch	ack and hav anly as d	lirected in this form and	l in Form
Debt		Sheronda Yvette Garth			2A-1Supp:	illected ill tills form and	i iii Foiiii
		Sheronda Tvette Gartii					
Debt (Spou	or 2 se, if filing)				1. There is no pres	umption of abuse	
	3,	Eastern District of	North Carolina	(NC	$\square$ 2. The calculation t	o determine if a presur	nption of abuse
Unite	ed States	Bankruptcy Court for the: Exemptions)		(110		nade under <i>Chapter 7 i</i> icial Form 122A-2).	Means Test
Case	e number					,	
(if kno						does not apply now be y service but it could ap	
					☐ Check if this is a		1 7
Off	icial F	orm 122A - 1				ar arrioridod illing	
		7 Statement of Your Cur	rent Mor	othly Inc	ome		12/15
OII	арісі	7 Statement of Tour our	Territ Wildi	itiliy iiic	, one		12/13
		and accurate as possible. If two married people a e sheet to this form. Include the line number to w					
case ı	number (if	known). If you believe that you are exempted fror	n a presumption	of abuse becau	se you do not have prin	narily consumer debts o	or because of
_		ry service, complete and file Statement of Exemp	lion irom Presun	npuon or Abuse	Under § 707(b)(2) (Ome	ciai Form 122A-15upp) w	ntn this form.
Part		Iculate Your Current Monthly Income					
1.		our marital and filing status? Check one on	iy.				
	_	arried. Fill out Column A, lines 2-11.					
		ed and your spouse is filing with you. Fill ou			2-11.		
	_	ed and your spouse is NOT filing with you.	•	•			
	_	ng in the same household and are not lega			•		
		ng separately or are legally separated. Fill on alty of perjury that you and your spouse are le			•		
		ng apart for reasons that do not include evading					spease are
		erage monthly income that you received from all a example, if you are filing on September 15, the 6-m.					
the	e 6 months,	add the income for all 6 months and divide the total	by 6. Fill in the res	sult. Do not inclu	de any income amount m	ore than once. For examp	ole, if both
sp	ouses own	the same rental property, put the income from that p	operty in one colu	umn only. If you h	Column A	Column B	ace.
					Debtor 1	Debtor 2 or	
						non-filing spouse	
2.		ss wages, salary, tips, bonuses, overtime, aductions).	and commission	ons (before all	\$ 4,455.15	\$	
3.		and maintenance payments. Do not include	payments from	a spouse if			
		s is filled in.			\$	\$	
4.	_	nts from any source which are regularly pa your dependents, including child support.		i			
	from an u	nmarried partner, members of your household	, your depender	nts, parents,			
		mates. Include regular contributions from a sp to not include payments you listed on line 3.	buse only if Col	umn B is not	\$ 0.00	\$	
5.		ne from operating a business, profession,	or farm				
				otor 1			
		eipts (before all deductions)	\$0.00				
	•	and necessary operating expenses	-\$ 0.00	Copy here ->	\$ 0.00	\$	
_		nly income from a business, profession, or farn me from rental and other real property	n \$	Copy liere ->	——————————————————————————————————————	Ψ	
6.	MET HICOI	ne nom rental and other real property	Deb	otor 1			
	Gross red	eipts (before all deductions)	\$ 0.00				
		and necessary operating expenses	-\$ 0.00				
	Net mont	nly income from rental or other real property	\$ 0.00	Copy here ->		\$	
7.	Interest,	dividends, and royalties			\$ 0.00	\$	

Debtor 1	Sheronda Yvette Garth	Case number (if known)	

				Column A		Column B	
				Debtor 1		Debtor 2 or non-filing sp	ouse
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:		it under				
	For you \$ For your spouse \$	0.0	00_				
•	For your spouse \$						
	Pension or retirement income. Do not include any an benefit under the Social Security Act.			\$	0.00	\$	
10.	Income from all other sources not listed above. Specific points and benefits received under the Social Species as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international a separate page and pu	ts or	\$	0.00	\$	
	·			\$	0.00	\$	
	Total amounts from separate pages, if any.		— +	\$	0.00	\$	
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to			4,455.15	+ \$		\$4,455.15
							Total current monthly
Part	2: Determine Whether the Means Test Applies t	o You					income
12.	Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line	•		Cor	y line 11 l	nere=>	\$ 4,455.15
					•		4,400.10
	Multiply by 12 (the number of months in a year)					ſ	<b>x</b> 12
	12b. The result is your annual income for this part of th	e form				12b.	\$53,461.80
13.	Calculate the median family income that applies to	you. Follow these step	s:			l	
	Fill in the state in which you live.	NC					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp		in the separ			\$56,742.00
14.	How do the lines compare?						
	<ul><li>Line 12b is less than or equal to line 13. O</li><li>Go to Part 3.</li></ul>	n the top of page 1, ch	eck box	1, There is	no presum	ption of abuse.	
	14b.  Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption o	f abuse is	determined by I	Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information or	this sta	atement and	l in any atta	achments is true	e and correct.
	X /s/ Sheronda Yvette Garth						
	Sheronda Yvette Garth Signature of Debtor 1						
	Date February 13, 2018  MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file Forr	n 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.					

Employment Security Commission Attn: Benefit Payment Control Post Office Box 26504 Raleigh, NC 27611-6504

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

Equifax Information Systems LLC P.O. Box 740241 Atlanta, GA 30374-0241

Experian P.O. Box 2002 Allen, TX 75013-2002

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2000

Internal Revenue Service (ED)\*\* Post Office Box 7346 Philadelphia, PA 19101-7346

US Attorney's Office (ED)\*\* 310 New Bern Avenue Suite 800, Federal Building Raleigh, NC 27601-1461

North Carolina Dept. of Revenue\*\* Post Office Box 1168 Raleigh, NC 27602-1168

.IMPORTANT NOTICE: See notice re: creditor claims set forth on Schedule A Afni, Inc. 404 Brock Drive Post Office Box 3097 Bloomington, IL 61701

Capital One Post Office Box 30285 Salt Lake City, UT 84130-0285

Conns Credit Corp Attn: Officer Post Office Box 2358 Beaumont, TX 77704-2358

Federal Loan Servicing P.O. Box 60610 Harrisburg, PA 17106

Gatewayone Lending 3818 E. Coronado Street, # 100 Anaheim, CA 92807

NCC Business Services, Inc 9428 Baymeadows Rd. Ste 200 Jacksonville, FL 32256-7912

OneMain 100 International Drive 17th Floor Baltimore, MD 21202

Raleigh Radiology Associates Post Office Box 12408 Roanoke, VA 24025-2408

Raleigh Radiology Cedarhurst Post Office Box 630945 Cincinnati, OH 45263 REX Healthcare Attn: Patient Financial Services 4420 Lake Boone Trail Raleigh, NC 27607

Rex Hospital Post Office Box 71058 Charlotte, NC 28272

State Farm Bank Post Office Box 2327 Bloomington, IL 61702-2327

Triangle Family Dentistry 1625 North Main Street Ste 201 Fuguay Varina, NC 27526

USAA Federal Savings Bank Attn: Officer/Bankruptcy Department Post Office Box 619094 Dallas, TX 75261-9741

USAA Savings Bank Post Office Box 33009 San Antonio, TX 78265-3009

# **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

in re	Sheronda Yvette Garth			
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR I	MATRIX	
ne abo	ove-named Debtor hereby verifies	s that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	February 13, 2018	/s/ Sheronda Yvette Garth		
		Sheronda Yvette Garth		
		Signature of Debtor		